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| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | | MALL EI | VIIIV | OR | OTHER SMALL | THAN YTITN |
| OTAL CLAIMS | | | | | 24 | | | | [| RATE | FEE | | RATE | FEE |
| OR | | | | T | HUMBER FRED | | NUMBER EXTRA | | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| OTAL CHARGEABLE CLAIMS | | | | IS | 24 minus 20= | | • 4 | | | X\$ 9= | 36 | OR | X\$18= | |
| DEPENDENT CLAIMS | | | | | 러 minus 3 = | | | | | X42= | 42 | OR | X84- | |
| ULTIPLE DEPENDENT CLAIM F | | | | | ESENT | | | | | +140= | | OR | +280= | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | | | TOTAL | 448 | OA | TOTAL | |
| | | LAIN | IS A | S A | | D - PAR | | (Column 3) | | | ENTITY | OR | OTHER | |
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| | Independent | • , | <u>ड</u> | | Minus | *** * | [| • / • | | X42= | | OR | X84= | 8800 |
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| | Aleile | | hen | | | | emn 2) | (Column 3) | | | | | | 1 1001 |
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